

**TOLER SCHAFFER, LLP**  
5000 Plaza on the Lake, Suite 265  
Austin, TX 78746  
Ph. 512-327-5515  
Fax 512-327-5575

RECEIVED  
CENTRAL FAX CENTER  
APR 11 2006

## FACSIMILE COVER SHEET

**DATE:** April 11, 2006

**TO:** Examiner CHAI, Longbit      **FAX NO.:** 571-273-8300  
USPTO GPAU 2131

**FROM:** Jeffrey G. Toler  
Reg. No.: 38,342

**RE U.S. App. No.:** 10/623,274, filed July 18, 2003

**Applicant(s):** Brian Gonsalves, et al.

**Atty Dkt No.:** 1033-SS00378

**Title:** SYSTEM AND METHOD FOR DETECTING COMPUTER PORT INACTIVITY

**NO. OF PAGES (including Cover Sheet):** 15

### MESSAGE:

Attached please find:

- ☒ Transmittal Form (1 pg)
- ☒ Reply to Non-Final Office Action (13 pgs)

5000 Plaza On The Lake  
Suite 265  
AUSTIN, TEXAS 78746

Tel: (512) 327-5515  
Fax: (512) 327-5575

### CONFIDENTIALITY NOTE

*The pages accompanying this facsimile transmission contain information from the law office of Toler Schaffer, L.L.P. and are confidential and privileged. The information is intended to be used by the individual(s) or entity(ies) named on this cover sheet only. If you are not the intended recipient be aware that reading disclosing copying distribution or use of the contents of this transmission is prohibited. Please notify us immediately if you have received this transmission in error at the number listed above and return the document to us via regular mail.*

**RECEIVED  
CENTRAL FAX CENTER**

**APR 11 2006**


PTO/SB/21 (09-04)

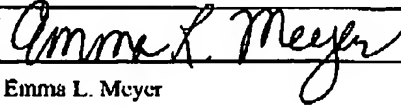
Approved for use through 07/31/2006, OMB 0651-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/623,274	
	Filing Date	July 18, 2003	
	First Named Inventor	Brian Gonsalves	
	Art Unit	2131	
	Examiner Name	CHAL Longbit	
Total Number of Pages in This Submission	15	Attorney Docket Number	1033-SS00378

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Pulsion <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks  <div style="text-align: center; font-size: 1.2em;">CUSTOMER NO.: 60533</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Toler Schaffer, L.L.P.		
Signature			
Printed name	Jeffrey G. Toler		
Date	4-11-2006	Reg. No.	38,342

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Emma L. Meyer	Date
		April 11, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED  
CENTRAL FAX CENTER

APR 11 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Brian Gonsalves, et al.

Title: SYSTEM AND METHOD FOR DETECTING COMPUTER PORT INACTIVITY

App. No.: 10/623,274

Filed: July 18, 2003

Examiner: CHAI, Longbit

Group Art Unit: 2131

Customer No.: 60533

Confirmation No.: 2414

Atty. Dkt No.: 1033-SS00378

M/S AF

Commissioner for Patents

PO Box 1450

Alexandria, VA 22313-1450

REPLY TO NON-FINAL OFFICE ACTION

Dear Sir:

In reply to the Non-Final Office Action mailed January 12, 2006, Applicants request reconsideration of the pending application based on the following Remarks:

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents on <u>April 11, 2006</u>	
<u>Emma L. Meyer</u>	<u>Emma L. Meyer</u>
Typed or Printed Name	Signature